



## BUILDING SERVICES REQUEST FORM

2009

Applicant Name:		
Applicant Address:		
Town:	Zip:	Phone:
Building Address:		
Town:	Zip:	Phone:
	Business Owner	
Building Owner (if different than	n applicant):	
Owner Address:		
Town:	Zip:	Phone:
Email:	-	
PROPERTY INFORMAT  Date of building's construction o	ION r modifications (if known):	
Present use:	Proposed use:	
	onal Register, either individually o	
PROJECT INFORMATIO	DN	
Please check the improvements r  Roof work  Repointing/masonry work  Interior remodeling  Other (please specify)	□ Electrical work	ars:  Sign improvement Painting (exterior) Repair/replace windows
	ou are currently considering imple	menting
Awning	,	☐ Window repair/upgrade
Painting (exterior)	☐ Facade restoration	☐ Building maintenance
Sign improvement	☐ Upper floor conversion	☐ Handicapped accessibility
$\square$ Other (please specify)		

Please attach a brief paragraph describing the business for promotional purposes. If we do not receive this information, we cannot issue press releases about the project.

Project budget:		
☐ Under \$5,000	\$5,000 - \$20,000	Over \$20,000
Financial incentives to be taken:		
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	r Non-Historic Commer	cial Buildings Built Before 1936
20% Rehabilitation Tax Credit fo	r Historic Buildings	☐ Local incentives
☐ 50% Disabled Access Tax Credit	☐ I would like more in	formation about tax credits
Target start date (month and year):		
Target completion date (month and	year):	
Please include any historic photos of	the property, if availabl	e (quality photocopies are acceptable).
Additional comments:		
Applicant signature		Date:
rippineant signature.		Date

Illinois Main Street Building Services are provided by the Illinois Historic Preservation Agency. Recommendations will meet the Secretary of the Interior's Standards for Rehabilitation. Recipients are free to use the recommendations at their discretion but are expected to complete the project. Recipients are required to share project cost information and photographs with Illinois Main Street and the local Main Street program within 3 months of completion. IHPA reserves the right to determine the order in which the applications are completed.

Applicants, please return this form, any historic photos, and the promotional paragraph to your Main Street Executive Director. Directors can fax this form and the promotional paragraph to 217-524-7525. If historic photographs are available, the packet of information can be mailed to:

Illinois Main Street Illinois Historic Preservation Agency One Old State Capitol Plaza Springfield, IL 62701

For additional information on the Architectural Services available from the Illinois Historic Preservation Agency, please visit www.illinoishistory.gov/ps/mainstreet.htm. For information on the Illinois Main Street program, visit www.illinoismainstreet.org.